APPLICATION DATA SHEET

Application Information

Application Type:: Regular

Title:: METHOD FOR REPAIRING DAMAGED

INTERVERTEBRAL DISCS

Attorney Docket Number:: S-9-6

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 34

Small Entity?:: No

Applicant Information

mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Lewis Sharps

Family Name:: Sharps

City of Residence:: Bryn Mawr

Country of Residence:: USA

Street of mailing address:: 911 Lafayette Road

City of mailing address:: Bryn Mawr

State or Province of Pennsylvania

Country of mailing address:: USA

Postal or Zip Code of 19010

Postal or Zip Code of 190 mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David C. Hovda

Family Name:: Hovda

City of Residence:: Mountain View

Country of Residence:: USA

Street of mailing address:: 1900 Miramonte Avenue

City of mailing address:: Mountain View

State or Province of California

mailing address::

Country of mailing address:: USA

Postal or Zip Code of

mailing address:: 94040

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Jean Woloszko

Family Name:: Woloszko

City of Residence:: Mountain View

Country of Residence:: USA

Street of mailing address:: 1964 Columbia Drive

City of mailing address:: Mountain View

State or Province of California

mailing address::

Country of mailing address:: USA

Postal or Zip Code of

mailing address:: 94040

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Hira V. Thapliyal

Family Name:: Thapliva

City of Residence:: Los Altos

Country of Residence:: USA

Street of mailing address:: 1192 Volti Lane

City of mailing address:: Los Altos

State or Province of California mailing address::

Country of mailing address:: USA

Postal or Zip Code of

mailing address:: 94024

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Philip E. Eggers

Family Name:: Eggers
City of Residence:: Dublin
Country of Residence:: USA

Street of mailing address:: 5366 Reserve Drive

City of mailing address:: Dublin

State or Province of Ohio mailing address::

Country of mailing address:: USA

Postal or Zip Code of 43017 mailing address::

Correspondence Information

Correspondence Customer Number:: 021394

Name:: ArthroCare Corporation

Street of mailing address:: 680 Vaqueros Avenue

City of mailing address:: Sunnyvale

State or Province of mailing

address::

CA

Country of mailing address::

USA

Postal or Zip Code of mailing address:: 94085-3523

Phone number::

(408) 736-0224

Fax Number::

(408) 530-9143

E-Mail address::

rbatt@arthrocare.com

Representative Information

Representative Customer Number::

021394

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation	09/676,194	9/28/00
09/676,194	Non-Provisional of	60/224,107	8/9/00
09/676,194	Continuation in Part	09/316,472	5/21/99
09/316,472	Continuation in Part	09/295,687	4/21/99
09/316,472	Continuation in Part	09/054,323	4/2/98
09/316,472	Continuation in Part	09/268,616	3/15/99
09/268,616	Continuation in Part	08/990,374	12/15/97
08/990,374	Continuation in Part	08/485,219	6/7/95

Assignee Information

Assignee name::

ArthroCare Corporation

Street of mailing address::

680 Vaqueros Avenue

City of mailing address::

Sunnyvale

State or Province of

mailing address::

California

Postal or Zip Code of

mailing address::

94085-3523